



Colorado Medicaid Benefit Coverage Standard

DIALYSIS TREATMENT CENTERS

Brief Coverage Statement

A dialysis treatment center is hospital-affiliated or independent of a licensed hospital, and approved to provide outpatient dialysis services and/or training for home or self dialysis.

ACUTE AND CHRONIC KIDNEY CONDITIONS

Dialysis is the process of cleaning the blood when the kidneys have failed and are no longer filtering the blood to remove waste and excess fluid. Kidney failure can stem from Acute Kidney Injury (Acute Renal Failure) or Chronic Kidney Disease (CKD).

1. Acute Kidney Injury (AKI) is the sudden loss of kidney function, the ability of the kidneys to remove waste and excess fluid. AKI is typically a condition in which kidney function can be expected to recover after a short period of time with treatment (i.e. pharmaceuticals or dialysis). However, AKI can progress to:
 - 1.1. A complete recovery of kidney function,
 - 1.2. Development of CKD, or
 - 1.3. End Stage Renal Disease – irreversible loss of kidney function.
2. Chronic Kidney Disease (CKD) is the slow loss of kidney function over time until the kidneys reach End Stage Renal Disease (ESRD). ESRD is defined as irreversible and permanent damage to the kidneys that requires either a regular course of dialysis treatment or kidney transplantation to maintain life.

DIALYSIS ACCESSES

In order to start dialysis, an access site must be created on the client. An access is a site from which blood can be safely removed and returned to the client's body. There are three types of dialysis accesses.

1. The creation of a permanent connection between an artery and a vein under the skin. There are two types of connections that can be created, both of which require a surgical procedure to implant the access beneath the skin of the forearm (or leg), and require time for the access site to mature.
 - 1.1. AV Fistula is formed through the direct, surgical connection of an artery and vein. Fistulas are the preferred vascular access for long-term dialysis patients because they last longer than any other vascular access and are less prone to infection and clotting.
 - 1.2. Grafts formed through the surgical connection of an artery and vein using a synthetic tube. The graft is usually a soft, synthetic tube that connects to an artery at one end and a vein at the other. The tube acts like a natural vein, allowing blood to flow through it.



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2. The direct placement of a tube (catheter) into a large vein in the neck, chest or groin. Catheters are flexible, hollow tubes which allow blood to flow in and out of the body. They are most commonly used as a temporary access when a client needs dialysis immediately and is waiting for a fistula or graft to mature, or when a permanent access fails and a client is too unstable to delay treatment. Several different types of catheters exist.
 - 2.1. Jugular catheters are inserted into the jugular vein on the side of the neck.
 - 2.2. Subclavian catheters: are placed into the subclavian vein under the collarbone on the chest.
 - 2.3. Femoral catheters are placed in the large femoral vein in the leg near the groin.
3. The direct placement of a catheter into the peritoneal (abdominal) cavity.

TYPES OF DIALYSIS PROCEDURES

The two types of dialysis procedures in common clinical usage are:

1. Hemodialysis: the blood passes through an artificial kidney machine, a dialyzer, (outside the body) and the waste products diffuse across a semi-permeable membrane into a solution known as dialysate, after which the clean (waste- free) blood is returned to the client's body.
 - 1.1. Hemodialysis can be performed in a dialysis treatment center or at home. There are three types of hemodialysis treatment.
 - 1.1.1. Conventional Hemodialysis: is performed at a dialysis treatment center three or four times a week. This is the most common and available type of hemodialysis and is available in-center or at home.
 - 1.1.2. Short Daily Hemodialysis: is performed at the client's home five to six times a week, for a short period of time and is available in-center or at home.
 - 1.1.3. Nocturnal Hemodialysis: is performed during the night while the client sleeps, and is available in-center (select centers) or at home.
2. Peritoneal dialysis: uses the client's peritoneum as an artificial kidney machine. The peritoneum is a natural, semi-permeable membrane that covers the abdominal organs and lines the abdominal wall. This membrane acts as a filter and allows toxins and fluid to be filtered from the blood. The waste products pass from the client's blood through the peritoneum into the peritoneal (abdominal) cavity. The client fills his or her cavity with dialysate through a catheter and periodically exchanges the waste filled dialysate with clean dialysate.
 - 2.1. Peritoneal dialysis can be performed at a dialysis treatment center or the client can perform treatments at home, at work, on vacation, or anywhere that is clean. Peritoneal Dialysis performed at a dialysis treatment center should only be done for a short period of time to assist the client with the transition of peritoneal dialysis outside of the dialysis center. There are two types of peritoneal dialysis: continuous ambulatory peritoneal dialysis (CAPD) and continuous cycling peritoneal dialysis (CCPD), where continuous



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means the client receives around-the-clock treatment because dialysate is usually in the abdomen 24 hours a day, seven days a week.

- 2.1.1. CAPD is performed manually, and can be done almost anywhere that is clean. Exchanges are usually performed every four to six hours during the day.
- 2.1.2. CCPD requires a machine, and is done at home with the client's catheter connected to the machine at night. The machine automatically controls the timing of exchanges, drains the used solution, and fills the peritoneal cavity with new solution.

Services Addressed in Other Policies

- Kidney Transplantation

Note: Coverage of access site procedures are a covered benefit under a separate policy.

Eligible Providers

Dialysis treatment centers must be enrolled in the Colorado Medical Assistance Program (Colorado Medicaid) and certified by the Centers for Medicare and Medicaid Services (CMS) to participate in the Medicare program as a dialysis treatment center.

Eligible Places of Service

- Independent Dialysis Center
- Hospital-Affiliated Dialysis Center

Eligible Clients

Any Colorado Medicaid client diagnosed with AKI or ESRD, which requires dialysis treatments to restore kidney function or maintain life.

Covered Services and Limitations

Due to the high costs of dialysis treatments, Colorado Medicaid requires that all clients be considered for the most cost efficient method of dialysis treatment through an evaluation for peritoneal dialysis based upon their individual medical diagnosis and condition. This requirement aligns with federal statute, which mandates that the facility develop and implement a written, individualized comprehensive plan of care for each patient that specifies the services necessary to address the patient's needs, as identified by the comprehensive assessment and changes in the patient's condition, and includes measurable and expected outcomes and estimated timetables to achieve these outcomes. The outcomes specified in the patient plan of care must be consistent with current evidence-based professionally-accepted clinical practice standards. This plan of care must represent the selection of a suitable treatment modality (e.g., dialysis or transplantation)



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and dialysis setting (e.g., home, self-care) for each patient (42 CFR 405, 410, 413, 414, 488 and 494).

IN CENTER, STAFF- ASSISTED DIALYSIS

1. Includes all hemodialysis and peritoneal dialysis treatments furnished by the facility's staff, as well as all necessary equipment, and supplies.
2. Continued outpatient hemodialysis is a benefit when one of the following applies:
 - 2.1. Training of the eligible recipient to perform self-treatment in the home environment is contraindicated; or
 - 2.2. The eligible client is not a proper candidate for self-treatment in a home environment; or
 - 2.3. The home environment of the eligible client contraindicates self-treatment; or
 - 2.4. The eligible client is awaiting a kidney transplant.

IN-CENTER, SELF- DIALYSIS, TRAINING AND SUPPLIES

Self- dialysis training refers to a program that trains clients to perform self-dialysis with little or no professional assistance, and trains other individuals to assist clients in performing self-dialysis

1. Self-dialysis is done within the facility with little or no professional assistance, by the client who has completed an appropriate course of training.
2. Includes training by qualified personnel, necessary supplies, and equipment for dialysis services.

HOME DIALYSIS, TRAINING, AND SUPPLIES

Home dialysis training refers to a program that trains clients to perform home dialysis with little or no professional assistance, and trains other individuals to assist clients in performing home dialysis

1. Home dialysis is done by an appropriately trained client and/or caregiver at home.
2. Includes training by qualified personnel, necessary supplies, and equipment for dialysis services.
3. Also includes delivery, installation, and maintenance of equipment for home dialysis.

ROUTINE LABORATORY SERVICES

1. The Colorado Dialysis Billing Manual lists all laboratory services that are considered routine and included in the dialysis center reimbursement.
2. Dialysis centers performing routine laboratory services must be certified clinical laboratories.



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ROUTINE DRUGS FOR DIALYSIS TREATMENT

The Colorado Dialysis Billing Manual lists all drugs that are considered routine and included in the dialysis center reimbursement.

Non-Covered Services and General Limitations

The following are non-covered services under the Colorado Medicaid program:

1. Costs associated with home dialysis other than necessary equipment, supplies, or training.
2. Blood and blood products.
3. Personal care items such as slippers, toothbrushes, etc.
4. Additional staff time or personnel costs.

Prior Authorization Requirements

Prior Authorization is not required for this service.

Billing Guidelines

Please refer to the Colorado Dialysis Billing Manual for specific billing instructions.



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References

American Association of Kidney Patients. "Understanding Your Hemodialysis Access Options."

American Association of Kidney Patients. "Understanding Your Hemodialysis Options."

American Association of Kidney Patients. "Understanding Your Peritoneal Dialysis Options."

Code of Federal Regulations, Title 42, Chapter IV, Subchapter B, § 405.2137.


Colorado Medical Assistance Program: Dialysis Billing Manual. Revised March 2010.

Commonwealth of Massachusetts Division of Medical Assistance: Renal Dialysis Clinic Manual. Effective 15 December 2001.


Centers for Medicare and Medicaid Services. Medicare Benefit Policy Manual: Chapter 11 – End Stage Renal Disease (ESRD). Revised 28 January 2011.
<http://www.cms.gov/manuals/Downloads/bp102c11.pdf>.

Washington Department of Social and Health Services: Kidney Center Services Billing Instructions. Effective 9 May 2010.

Washington Administrative Code 388-540: Kidney Disease Program and Kidney Center Services



Medicaid Director Signature



Date